

County of Los Angeles DEPARTMENT OF CHILDREN AND FAMILY SERVICES

425 Shatto Place, Los Angeles, California 90020 (213) 351-5602

Board of Supervisors
HILDA L. SOLIS
First District
MARK RIDLEY-THOMAS
Second District
SHEILA KUEHL
Third District
DON KNABE
Fourth District
MICHAEL D. ANTONOVICH
Fifth District

BRANDON NICHOLS Chief Deputy Director

April 22, 2016

To:

Supervisor Hilda L. Solis, Chair

Supervisor Mark Ridley-Thomas

Supervisor Sheila Kuehl Supervisor Don Knabe

Supervisor Michael D. Antonovich

From:

Philip L. Browning

Director

THE DANGERFIELD INSTITUTE OF URBAN PROBLEMS FOSTER FAMILY AGENCY CONTRACT COMPLIANCE REVIEW

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a Contract Compliance Review of The Dangerfield Institute of Urban Problems Foster Family Agency (the FFA) in February 2015. The FFA has one licensed office located in the Second Supervisorial District and provides services to the County of Los Angeles DCFS placed children and children from other counties. According to the FFA's Program Statement, its stated mission is "to provide these children with continuity of care, nurturance and services, which will meet their individualized needs and those of their families."

At the time of the review, the FFA supervised 26 DCFS placed children in 17 Certified Foster Homes (CFHs). The children's overall average length of placement was seven months and their average age was four.

SUMMARY

During CAD's Contract Compliance Review, the interviewed children generally reported feeling safe in the FFA CFHs, having been provided with good care and appropriate services, being comfortable in their placement environment and treated with respect and dignity. The Certified Foster Parents (CFPs) reported that they were supported by the FFA staff in their efforts to provide care, supervision and service delivery to the children placed in their homes.

The FFA was in full compliance with 3 of 10 applicable areas of CAD's Contract Compliance Review: Personal Rights and Social/Emotional Well-Being; Discharged Children; and Personnel Records. The area of Psychotropic Medication was not applicable as none of the children selected were prescribed psychotropic medication at the time of review.

Each Supervisor April 22, 2016 Page 2

CAD noted deficiencies in the following areas: Licensure and Contract Requirements: related to one Community Care Licensing (CCL) citation and the FFA not assessing a CFH prior to placing more than two children; CFH, related to safety inspections not being conducted every six months, a CFP not completing the required annual training and two CFPs not completing the annual vehicle inspection; Facility and Environment, related to one CFH not maintaining common areas, children's bedrooms not being maintained and money and clothing allowance logs not being maintained; Maintenance of Required Documentation and Service Delivery, related to the FFA not obtaining the DCFS Children's Social Worker's (CSW's) authorization to implement Needs and Services Plans (NSPs), the FFA not timely developing Initial NSPs and quarterly reports and one FFA Social Worker not conducting required weekly visits with the placed children; Education and Workforce Readiness, related to the FFA not obtaining a current Individualized Educational Plan for one child; Health and Medical Needs, related to initial medical and dental examinations not being conducted timely; and Personal Needs/Survival and Economic Well-Being, related to a CFP not providing weekly allowance to a placed child.

Attached are the details of CAD's review.

REVIEW OF REPORT

On March 5, 2015, Viktoria Penchuk, DCFS CAD and Elizabeth Villalobos, DCFS Out-of-Home Care Management Division held an exit conference with the FFA representatives: Lorrie Irving, Assistant Executive Director; Wendy Suer, LCSW Program Administrator; Sumaiya Morris, FFA Social Worker; and Joddi Hundessa, FFA Social Worker. The FFA representatives were in agreement with the review findings and recommendations, were receptive to implementing systemic changes to improve compliance with regulatory standards and to addressing the noted deficiencies in a Corrective Action Plan (CAP).

A copy of this report has been sent to the Auditor-Controller and CCL.

The FFA provided the attached approved CAP addressing the recommendations noted in this report. CAD conducted a follow-up visit to the FFA on June 1, 2015, to verify implementation of the CAP.

If you have any questions, your staff may contact me or Aldo Marin, Board Relations Manager, at (213) 351-5530.

PLB:EM:LTI:dlf

Attachments

c: Sachi A. Hamai, Chief Executive Officer
John Naimo, Auditor-Controller
Public Information Office
Audit Committee
Elouise Dangerfield, Executive Director, The Dangerfield Institute of Urban Problems
Lenora Scott, Regional Manager, Community Care Licensing Division
Lajuannah Hills, Regional Manager, Community Care Licensing Division

4738 11th Avenue

Los Angeles, CA 90043 License Number: 197800209

	Contract Compliance Review Findings: February 2015				
I	Licensure/Contract Requirements (7 Elements)	The state of the s			
	 Timely Notification for Child's Relocation Timely, Cross-Reported SIRs Runaway Procedures in Accordance with the Contract Are there CCL Citations/OHCMD Safety Reports If applicable, FFA Ensures Complete Required Whole Foster Family Home Training FFA Pays Certified Foster Parents (CFP) Whole Foster Family Home Payments FFA conducts an Assessment of CFP Prior to Placement of Two (2) or more children 	 Full Compliance Not Applicable Full Compliance Improvement Needed Not Applicable Not Applicable Improvement Needed 			
II	Certified Foster Homes (12 Elements)				
:	Home Study and Safety Inspection Conducted Prior to Certification Agency's Inquiry with OHCMD for Historical	Full Compliance Full Compliance			
	Information Prior to Certification 3. Timely Criminal Clearances (FBI, DOJ, CACI) Prior to Certification	3. Full Compliance			
	Timely, Completed, Signed Criminal Background Statement	4. Full Compliance			
	 Health Screening & TB test Prior to Certification All Required Training Prior to Certification Certificate of Approval on File/Including Capacity Safety Inspection Completed At Least Every Six Months or Per-Approved Program Statement Completed Annual Training Hours for Re-certification and Current CPR/First-Aid/Water Safety Certificates Current Drivier's License/Auto Insurance/Annual 	5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Improvement Needed 9. Improvement Needed			
	Vehicle Maintenance Documentation for CFPs and Designated Drivers, if applicable car seat(s) 11.Criminal Clearances and Health Screening/CDL/CPR/ FBI/DOJ/CACI/Auto Insurance for Other Adults in the Home 12.FFA Assists CFPs in Providing Transportation Needs	11. Full Compliance 12. Full Compliance			

Ш	Facility and Environment (7 Elements)	
	 Exterior/Grounds Well Maintained Common Areas Well Maintained Children's Bedrooms/Interior Well Maintained Sufficient and Appropriate Educational Resources Adequate Perishable and Non-Perishable Food CFP Conducted Disaster Drills and Documentation Maintained Money and Clothing Allowance Logs Maintained 	 Full Compliance Improvement Needed Improvement Needed Full Compliance Full Compliance Full Compliance Full Compliance Full Compliance
IV	Maintenance of Required Documentation and	·
	Service Delivery (10 Elements)	
	FFA Obtains or Documents Efforts to Obtain DCFS Children's Social Worker's (CSW's) Authorization to Implement NSPs	Improvement Needed
	2. CFPs Participated in Development of the NSPs	2. Full Compliance
	Children Progressing Towards Meeting NSP Goals	3. Full Compliance
	4. FFA Social Workers Develop Timely, Comprehensive Initial NSP with Child's Participation	4. Improvement Needed
	5. FFA Social Workers Develop Timely, Comprehensive Updated NSPs with Child's Participation	5. Not Applicable
	6. Therapeutic Services Received	6. Full Compliance
	7. Recommended Assessment/Evaluations Implemented	7. Full Compliance
	8. DCFS Children's Social Worker's Monthly Contacts Documented in Child's Case File	8. Full Compliance
	9. FFA Social Workers Develop Timely, Comprehensive Quarterly Reports	9. Improvement Needed
	10. FFA Social Workers Conduct Required Visits	10. Improvement Needed

V	Education and Workforce Readiness (5 Elements)	
	Children Enrolled in School Within Three School Days	1. Full Compliance
	Children Attend School as Required and FFA Facilitates in Meeting Children's Educational Goals	2. Improvement Needed
	Current Children's Report Cards/Progress Reports Maintained	3. Full Compliance
	Children's Academic Performance and/or Attendance Increased	4. Not Applicable
=	5. FFA Facilitates Child's Participation in YDS or Equivalent Services and Vocational Programs	5. Not Applicable
VI	Health and Medical Needs (4 Elements)	_
	 Initial Medical Exams Conducted Timely Follow-Up Medical Exams Conducted Timely Initial Dental Exams Conducted Timely Follow-Up Dental Exams Conducted Timely 	 Improvement Needed Full Compliance Improvement Needed Full Compliance
VII	Psychotropic Medication (2 Elements)	
i i	Current Court Authorization for Administration of Psychotropic Medication Current Psychiatric Evaluation Review	Not Applicable

VIII	Personal Rights and Social/Emotional Well-Being	
	(10 Elements)	
	Children Informed of Agency's Policies and	Full Compliance (All)
	Procedures	, an earnprise (* m)
	2. Children Feel Safe in the CFP Home	
	3. CFPs Efforts to Provide Nutritious Meals and	
	Snacks	
	4. CFPs Treat Children with Respect and Dignity	
	5. Children Allowed Private Visits, Calls and to	
	Receive Correspondence	
	6. Children Free to Attend or Not Attend Religious	
	Services/Activities of Their Choices	
	7. Children's Chores Reasonable	
	8. Children Informed About Their Medication and	
	Right to Refuse Medication	
1	9. Children Aware of Right Refuse or Receive	
	Medical, Dental and Psychiatric Care	
	10. Children Given Opportunities to Participate in	
-	Extracurricular Activities, Enrichment and Social	
	Activities	
IX	Personal Needs/Survival and Economic Well-Being	
	(7 Elements)	
	Clothing Allowance Provided in Accordance with	1. Full Compliance
	FFA Program Statement	
	Ongoing Clothing Inventories of Adequate	2. Full Compliance
	Quantity and Quality	
	3. Children Involved in the Selection of Their	3. Full Compliance
	Clothing	
	4. Provision of Sufficient Supply of Clean Towels	4. Full Compliance
	Personal Care Items Meeting Ethnic Needs	
	5. Minimum Weekly Monetary Allowances	5. Improvement Needed
	6. Management of Allowance/Earnings	6. Full Compliance
	7. Encouragement and Assistance with a Life	7. Full Compliance
	Book/Photo Album	
X	Discharged Children (3 Elements)	
	Completed Discharge Summary	1. Full Compliance
	2. Attempts to Stabilize Children's Placement	2. Full Compliance
	3. Child Completed High School (if applicable)	3. Not Applicable

XI	Personnel Records (9 Elements)		
-	1.	Criminal Clearances (FBI, DOJ, and CACI) Signed and Submitted Timely	Full Compliance (All)
0	2.	Timely, Completed, Signed Criminal Background Statement	
	3.	FFA Social Workers Met Education/Experience Requirements	
	4.	Timely Employee Health Screening/TB Clearances	
	5.	Valid Driver's License and Auto Insurance	
	6.	FFA Employees Signed Copies of FFA Policies and Procedures	
	7.	FFA Employees Completed All Required Training and Documentation Maintained	
	8.	FFA Social Workers Have Appropriate Caseload Ratio	
	9.	FFA Maintained Written Declarations for Part-Time Contracted FFA Social Workers	
	4)	Caseloads Not to Exceed a Total of 15 Children	Δ.

SCOPE OF REVIEW

The following report is based on a "point in time" review. This compliance report addresses findings noted during the February 2015 review. The purpose of this review was to assess The Dangerfield Institute of Urban Problems, Foster Family Agency's (the FFA's) compliance with its County contract and State regulations and included a review of the FFA's Program Statement as well as internal administrative policies and procedures. The compliance review covered the following 11 areas:

- Licensure/Contract Requirements,
- Certified Foster Homes.
- Facility and Environment,
- Maintenance of Required Documentation and Service Delivery,
- Education and Workforce Readiness.
- Health and Medical Needs,
- Psychotropic Medication,
- Personal Rights and Social/Emotional Well-Being,
- Personal Needs/Survival and Economic Well-Being.
- Discharged Children, and
- Personnel Records.

For the purpose of this review, seven placed children were selected for the sample. The Contracts Administration Division (CAD) interviewed three children. Four children were too young to be interviewed. However, during the home visits, the children were observed to be comfortable and well cared for in the Certified Foster Homes (CFHs) and their Certified Foster Parents (CFPs) were observed to be attuned to the needs of the children. CAD reviewed all seven case files to assess the care and services they received. Additionally, four discharged children's files were reviewed to assess the FFA's compliance with permanency efforts. At the time of the review, none of the placed children were prescribed psychotropic medication.

CAD reviewed four CFP files and three staff files for compliance with Title 22 Regulations and County contract requirements. Interviews were conducted with four CFPs to assess the quality of care and supervision provided to children.

CONTRACTUAL COMPLIANCE

CAD found the following seven areas out of compliance:

Licensure and Contract Requirements

• Community Care Licensing (CCL) citation.

CCL cited the FFA on February 5, 2015, as a result of a complaint received on October 14, 2014. The investigation for a personal rights violation was inconclusive. During this visit, the CFP did not provide access to her son's bedroom when requested by CCL. It was discovered that the CFP's adult daughter slept on the couch in the living room with her son. On other occasions, the CFP's adult daughter and

her son slept on a sofa bed in the room with two placed children. The CFP's grandson slept in the same room with two placed children. CCL cited the FFA for the above and requested a Plan of Correction (POC) from the FFA. On March 4, 2015, the FFA submitted the POC to CCL stating that the FFA conducted training on Title 22 Regulations with the CFP. CCL cleared the POC on March 12, 2015. A referral for this was investigated by a Department of Children and Family Services (DCFS) Emergency Response (ER) Children's Social Worker (CSW) and the allegation of General Neglect was deemed to be inconclusive. On October 23, 2014, the Out-of-Home Care Investigations Section (OHCIS) placed the home on an "Indefinite Hold" and determined that the CFP would no longer be used as a placement resource for DCFS children.

 The FFA did not conduct an assessment of a CFP prior to placing two or more children in a home.

One CFP currently has five DCFS placed children in her home. The third, fourth and fifth children are not siblings and were placed in the CFH at different times. Prior to placing more than two children in the home, the FFA did not conduct an assessment of the CFP as required. There was no documentation of the FFA receiving DCFS approval to place more than two children under age of 36 months prior to the placement of the three children who were 9, 18 and 24 months.

This CFP is the Legal Guardian to a 10-year-old nephew and holds a day care license to care for four children. There was no documentation of the FFA's assessment confirming the CFP was able to provide sufficient care to all children present in the home each day.

During a follow-up visit conducted by CAD on June 1, 2015, CAD sampled five additional children's files and verified that the FFA implemented the use of an assessment form created by the FFA to be used when additional children will be placed in a home.

Recommendations:

The FFA's management shall ensure that:

- 1. The FFA is in full compliance with Title 22 Regulations and free of CCL citations.
- 2. The FFA conducts an assessment of CFP prior to placing two or more children in the home.

Certified Foster Homes

• Safety inspections were not conducted at least every six months or per the approved Program Statement.

Per the FFA's Program Statement, safety inspections are to be conducted on a quarterly basis. For one CFH, the safety inspections were conducted February 9, 2015, November 17, 2014 and February 3, 2014. There were nine months between two of the safety inspections.

During the exit conference, the FFA representatives reported the CFP asked to have this home put on hold; thus, no safety inspections were required between February 2014 and November 2014. However, CAD verified that the CFP had two DCFS placed children during the period of February 2014 through November 2014.

CAD conducted a follow-up visit on June 1, 2015 and confirmed that the FFA implemented the new protocol of using a tracking audit sheet, developed by the FFA since April 1, 2015, to track inspections. CAD verified that the process was implemented and the FFA is conducting inspections.

A CFP did not complete the required annual training hours.

During the review, the FFA representative stated they were not aware that both parents in the home needed to complete the annual training when two CFPs are co-applicants. One CFP from this CFH was removed from the certificate. The FFA conducted an in-service training for all CFPs on March 18, 2015 to ensure that each individual listed on the certificate is required to complete 15 hours of annual training. CAD received verification of attendance to the training that was conducted. The FFA will ensure all adults in the home are trained on the FFA's policies and procedures and on applicable Title 22 Regulations.

 Documentation of current annual vehicle maintenance for CFPs including applicable car seats was not maintained.

One CFP's file did not have proof of an annual vehicle inspection for 2014. The CFP was advised to take the vehicle to a licensed mechanic. However, when CAD conducted the home visit on February 24, 2015, the vehicle inspection had not been completed.

Another CFP did not have proof of the annual vehicle inspection for 2014. On April 27, 2015, CAD received proof that a vehicle safety inspection was completed on March 17, 2015.

During the review, CAD noted that a CFP was transporting a DCFS placed 5-year-old child without a car booster seat. The CFP stated she believed that the child did not require a car seat or booster seat since the child is over 68 pounds. CAD informed the CFP and immediately contacted the FFA Social Worker to ensure that the CFP will not transport the child without a booster seat. On February 23, 2015, the FFA provided pictures demonstrating the child secured in a booster seat in the CFP's car. The FFA conducted a refresher training for all CFPs to address mandatory requirements regarding the use of car seats and booster seats based on the age and height of a child. CAD verified that all current CFPs attended 1 of 3 training sessions held on April 15, 2015, April 29, 2015 and May 6, 2015.

Recommendations:

The FFA's management shall ensure that:

- 3. Safety inspections are completed at least every six months or per approved Program Statement.
- 4. CFPs complete annual training hours.

5. Annual vehicle maintenance documentation for CFPs is maintained and car seats are utilized, as needed.

Facility and Environment

Common areas were not well maintained.

In CFH #2 CAD found large black trash bags filled with clothes all over the living room, creating a mess and difficult passage. The CFP stated she was in the process of doing laundry and cleaning the closets. This matter was brought to the attention of the FFA. On April 4, 2015, CAD received confirmation the common areas had been cleaned.

During the exit conference, the FFA representatives stated that the FFA Social Worker will conduct a walkthrough of the CFH during bi-weekly home visits, increase safety home inspections to once a month as well as document home visits addressing any concerns and compliance with Title 22 Regulations. In addition, if compliance concerns with Title 22 Regulations arise, the FFA Social Worker will increase unannounced visits to the CFH to three times per month.

During a follow-up visit conducted by CAD on June 1, 2015, CAD verified that the FFA implemented its compliance protocol for the CFH. Per documentation, no deficiencies were noted during the home inspections.

Children's bedrooms were not well maintained.

In CFH #2 CAD found that the children's bedrooms were not maintained in a clean and neat condition. Both children's bedroom closets were filled with adult clothes while children's clothes were stored in a dresser. One of the bedroom closet doors was broken and inoperable. The concerns were brought to the FFA Social Worker's attention on March 10, 2015. CAD received pictures showing that the adult clothes were removed from the closets in the children's bedrooms. CAD was informed the closet repair had been requested.

CAD conducted a follow-up visit on June 1, 2015 and the closet door had not yet been repaired. The FFA was advised to assist the CFP and follow-up with the apartment building manager to ensure completion of the repair. On July 8, 2015, CAD received pictures of the repaired closet doors.

In CFH #3 CAD found that appropriate sleeping arrangements were not provided. The CFP's 4-year-old son was sleeping in his parents' bedroom. There was no documentation and/or a waiver from CCL for the sleeping arrangement.

The FFA representatives reported that the child has a medical condition that requires him to sleep in a room with an adult for safety reasons, but the FFA did not request a waiver form CCL. The FFA submitted the medical documentation to CAD and to CCL with a waiver request. On June 29, 2015,

CAD received a letter confirming approval of the exception for the sleeping arrangements until June 19, 2016.

Comprehensive clothing and monetary allowance logs were not maintained.

The four CFHs did not have records documenting that clothes were purchased on a monthly basis. CFH #1 did not have documentation of clothing purchases for one child in January 2015. CFH #2 did not have documentation of clothing purchases for September 2014 or for November 2014 through January 2015. This home did not have records of providing the child the weekly allowance either. CFH #3 did not have documentation of clothing purchases for three children. There was no documentation for clothing purchases for one child in December 2014 and for another child from June 2014 through August 2014 and from September 2014 through January 2015. CFH #4 did not have documentation of clothing purchases for one child in October 2015 and for another child in November 2014.

The FFA developed a new Clothing Purchase Form and conducted an in-service training for all CFPs, instructing them on policies and procedures in regards to purchasing clothing, distributing weekly allowance and maintaining proper documentation. Training sessions were offered on March 18, 2015, April 15, 2015, April 29, 2015 and May 6, 2015, to ensure all current CFPs attended. During a follow-up visit conducted by CAD on June 1, 2015, CAD verified that the FFA made progress in implementing the new procedures and protocols. CAD noted that a few CFPs were not utilizing the new FFA form appropriately, as they did not follow the guidelines provided by the FFA during training. The FFA administration will continue working with the CFPs in order to remain in compliance.

Recommendations:

The FFA's management shall ensure that:

- 6. All common areas are well maintained.
- 7. Children's bedrooms are well maintained.
- 8. Money and clothing allowance logs are maintained.

Maintenance of Required Documentation and Service Delivery

• The FFA did not obtain or document efforts to obtain the DCFS Children's Social Worker's (CSW's) authorization to implement the Needs and Services Plan (NSP).

For 5 of 18 NSPs reviewed, the FFA did not obtain or document attempts to timely obtain the DCFS CSW's signature authorizing implementation of the NSPs. Of the five NSPs, four had only one attempt to obtain signatures. One of the four NSPs noted above was also subsequently signed two months late. The fifth NSP was signed one month late.

• The FFA Social Workers did not develop timely Initial NSPs.

CAD reviewed seven Initial NSPs. Two NSPs were not developed timely; one was developed 22 days late and another was developed one month late.

The FFA Social Workers did not develop timely quarterly reports.

CAD reviewed 11 quarterly reports. Three quarterly reports for one child were not developed timely. The first quarterly report was developed seven days late; the second quarterly report was developed 17 days late; and the third quarterly report was developed 16 days late.

During the exit conference, the FFA representatives stated the FFA will re-train staff on the development of NSPs. The FFA provided in-service training for their social workers that are responsible for developing NSPs. CAD verified the FFA Social Workers attended the training on April 21, 2015. The FFA also mandated the social workers to attend Out-Of-Home Care Management Division's (OHCMD's) NSP training on May 8, 2015. During a follow-up visit conducted on June 1, 2015, CAD reviewed four of the newly developed quarterly reports and verified that all four quarterly reports were developed timely with all required signatures.

The FFA Social Workers did not conduct required visits.

Weekly contacts between the FFA Social Worker and one DCFS placed child were documented in the child's file. CAD found identical notes that were copied and pasted for the following dates: June 16, 2014, June 24, 2014, September 30, 2014, October 7, 2014, December 11, 2014 and December 15, 2014.

During the exit conference, the FFA representative stated that the FFA will re-train staff on conducting required visits. The training took place on April 21, 2015. CAD verified that all FFA Social Workers were in attendance. CAD conducted a follow-up visit on June 1, 2015 and reviewed seven children's files for a two-month period following the CAD review. CAD observed the notes reflected that the required visits were being conducted.

Recommendations:

The FFA's management shall ensure that:

- 9. FFA obtains or documents efforts to obtain DCFS CSW's authorization to implement the NSP.
- 10. FFA Social Workers develop timely Initial NSPs.
- 11. FFA Social Workers develop timely quarterly reports.
- 12. FFA Social Workers conduct required visits.

Education and Workforce Readiness

One child's current Individualized Educational Plan (IEP) was not developed.

CAD reviewed seven children's files. Two of the files were for school-age children. One child receiving special education services did not have a current IEP in the file. The FFA obtained a copy of the child's IEP and submitted it to CAD on March 10, 2015.

During the exit conference, the FFA representatives stated the FFA will re-train staff reviewing compliance in this area and the importance of obtaining and maintaining school records in order to monitor educational needs and progress. The training took place on April 21, 2015. CAD verified all FFA Social Workers were in attendance. In addition, the FFA hired a quality assurance employee to conduct monthly chart audits to ensure educational services are addressed.

Recommendation:

The FFA's management shall ensure that:

13. The FFA facilitates educational goals and services are met.

Health and Medical Needs

Initial medical examinations were not conducted timely.

CAD reviewed seven children's files and found that two children received an initial medical examination three months late. The files did not have documentation of any barriers or explanation for the reason why the exams were late.

Initial dental examinations were not conducted timely.

CAD reviewed seven children's files. Initial dental examinations for three children were late. One was two days late and the others were two and three months late, respectively. There was no documentation of any barriers or explanation for the reason why the exams were late.

During the exit conference, the FFA representatives stated the FFA will develop new procedures that will assist in identifying deficiencies in this area. In addition, the FFA will re-train staff on the proper protocol and new procedures. The training took place on April 21, 2015. CAD verified that all FFA Social Workers attended.

Recommendations:

The FFA's management shall ensure that:

14. Initial medical examinations are conducted timely.

15. Initial dental examinations are conducted timely.

Personal Needs/Survival and Economic Well-being

One child was not provided with minimum weekly monetary allowance.

One child was not clear about his monetary allowance with regard to the frequency and amount. During the interview with the CFP, she indicated that she was not sure how much she was supposed to give to the child and asked CAD for this information. The CFP attempted to create the weekly allowance log by asking the child to sign for the missing dates during the home visit.

During the exit conference, the FFA representatives stated the FFA would hold a mandatory training for the CFPs to address requirements for keeping and maintaining the FFA's forms as well as guidelines for weekly allowance distribution. In addition, the FFA Social Workers will speak with the children about their allowance during weekly home visits and document the outcome in the weekly home visit form that is maintained in the children's files. CAD verified that the training for CFPs took place on March 18, 2015 and the FFA Social Workers received training on April 21, 2015.

Recommendation:

The FFA's management shall ensure that:

16. Children are provided with minimum weekly monetary allowance.

PRIOR YEAR FOLLOW-UP FROM DCFS CAD'S FFA CONTRACT COMPLIANCE REVIEW

The last compliance report from CAD dated August 17, 2015, identified 11 recommendations.

Results:

Based on the results of this review, the FFA fully implemented 7 of 11 previous recommendations for which they were to ensure that:

- Home Studies and safety inspections are conducted prior to certification.
- Current auto insurance is maintained for all CFPs and their designated drivers.
- Exterior/Grounds are well maintained.
- CFPs conduct disaster drills and maintain documentation.
- CFPs participate in the development of the NSPs.
- FFA Social Workers develop Initial NSPs with the child's participation.
- All CFPs encourage and assist placed children to maintain a Life Book/Photo Album.

The FFA did not implement 4 of 11 recommendations for which they were to ensure that:

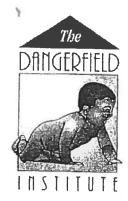
- Common areas are well maintained.
- Money and clothing allowance logs are maintained.
- The DCFS CSW's authorization to implement NSPs is obtained.
- FFA Social Workers complete timely, comprehensive, guarterly reports.

Recommendation:

17. The outstanding recommendations from the prior report are noted in this report as recommendation numbers 6, 8, 9 and 11, are fully implemented.

At the exit conference, the FFA representatives expressed their desire to remain in compliance with all Title 22 Regulations and contract requirements and were in agreement with the findings and recommendations.

CAD conducted a follow-up visit on June 1, 2015 and noted that the FFA implemented 12 of 16 recommendations noted in this report. The FFA did not fully implement new clothing purchase forms developed by the FFA to ensure proper documentation of clothing purchases; tracking procedures to ensure that initial medical and dental appointments are conducted timely; and the FFA Social Workers follow new procedures developed by the FFA to ensure that the children receive weekly allowance as required. The FFA was advised to fully implement their documentation procedures. A newly hired quality assurance employee was in the process of conducting an internal audit and developing an internal tool that would help the FFA to be in compliance with Title 22 Regulations and the County contract. CAD will assess for implementation of the recommendations during the next Contract Compliance Review. OHCMD will provide ongoing support technical assistance prior to the next review.



April 5, 2015

To:

Viktoria Penchuk

Children's Services Administrator I

Contract Compliance Administrator

Via e-mail-kamarv@dcfs.lacounty.gov

"Finding a Safe Harbor"

From: Lorrie Irving, Assistant Executive Director

Wendy Suer, LCSW, Program Administrator

NON PROFIT ORGANIZATION 188495-4167526

Dangerfield Institute of Urban Problems Foster Family Agency

Re: CORRECTIVE ACTION PLAN

4738 11TH AVENUE LOS ANGELES, CA 90043 323/290-5058 323/299-7160 FAX The following Corrective Action Plan is in response to the annual Contract Compliance Review conducted on February 12, 2015 by Viktoria Penchuk, Children's Services Administrator I, Contract Compliance Administrator. To maintain compliance with County contract and Community Care Licensing Title 22 Regulations, Dangerfield Institute of Urban Problems Foster Family Agency will focus on the ongoing training of certified foster parents and agency staff, increased and improved monitoring of certified foster homes, and the implementation of new internal auditing procedures.

I. <u>Licensure/Contract Requirements</u>

(4) Is the agency free of substantiated Community Care Licensing complaints' reports on safety and physical plant deficiencies since the last review? (SAFETY)

Finding(s): The FFA was cited by CCLD on 2/5/2015 (sections 89244 (a), 89387 (a) (4), 89387 (a) (3), and 89387 (a) (1).

PLAN: On February 2, 2015, Community Care Licensing Division cited Dangerfield Foster Family Agency as a result of deficiencies and findings during a visit to a certified foster home. The deficiencies were as follows: the certified foster parent did not allow access to her son's bedroom during the visit; the certified foster parent's adult daughter slept on the couch in the living room with her son; the certified foster parent's adult daughter and her son slept on the sofa bed in the room with two foster children and; the certified foster parent's grandson slept in the same room with two foster children. A Plan of Correction for the deficiencies was submitted to Community Care Licensing Division on March 4, 2015. Dangerfield Foster Family Agency conducted training on Title 22 regulations with the certified foster parent, specifically addressing the deficiencies noted pertaining to Buildings and Grounds and policies and procedures with respect to having all the rooms open and not having any locks on doors. A

outstanding Safety Home Inspections. Full implementation of this new procedure will take effect on April 1, 2015.

(16) Have foster parents completed the required additional training of 12 hours during the first year and 15 hours every year thereafter, as well as CPR, First-Aid and Water Safety certificates (if applicable)? (SAFETY)

<u>Finding(s)</u>: The certified foster parent (father) did not complete required annual training in 2014.

PLAN: Dangerfield Foster Family Program Administration provided clarification to all certified foster parents during in-service training on March 18, 2015 that each individual listed on the Certificate of Approval is required to complete 15 hours of annual training. The certified foster parent (father) did not wish to be listed on the Certificate of Approval and considered a "coapplicant" as such was the case with one other two parent household. The "applicant" and identified certified foster parent was the foster mother who did fulfill the annual training requirements. Program Administrator has since changed Certificates of Approval reflecting the "applicant" and identified certified foster parent as the individual responsible for meeting training requirements. The identified certified foster parent must attend the monthly foster parent meetings to keep abreast of agency, DCFS, and licensing requirements as well as provide pertinent information to enhance skills as a certified foster parent.

(17) Do the certified foster parents and/or designated drivers have valid California driver's license, auto insurance, annual documentation of vehicle maintenance, and if applicable, car seat(s)? (SAFETY)

Finding(s): During a home inspection, it was discovered that a certified foster parent was transporting a 5-year-old child without a car seat/booster. Dangerfield Foster Family Agency provided the certified foster parent with an appropriate booster. CAD received pictures of a booster installed in the certified foster parent's automobile as proof via email. In addition, two certified foster parents had no proof of annual vehicle inspections such that the agency was out of compliance with County contract and Foster Family Agency Program Statement.

PLAN: In order to maintain compliance and ensure the safety of placed children, Dangerfield Foster Family Agency will be providing a certified foster parent training on April 15, 2015 to address mandatory requirements regarding the use of car seats and boosters (based on the age and height of a child) and reviewing California's law regarding this matter. A sign in and out log will be provided to CAD as proof of certified foster parents' attendance. With respect to vehicle maintenance, Dangerfield Foster Family Agency requires that Vehicle Safety Inspections be conducted annually prior to recertification (as well as initially prior to certification). Certified foster parents will be reminded of this mandatory requirement during the certified foster

increase unannounced visits to the certified foster home to three times per month. Dangerfield Foster Family Agency Program Administrator will ensure consistent monitoring in this certified foster home effective April 1, 2015. In regards to the current sleeping arrangement for the certified foster parent's 5-year-old biological child, the Agency Social Worker with follow Dangerfield Foster Family Agency procedure in attempting to obtain an approved exception from Community Care Licensing. There are justifiable reasons and special circumstances for the biological child to sleep in the certified foster parent's bedroom (a documented medical condition). Once an approved exception is received, the Agency Social Worker will continuously document home visits addressing any concerns and compliance with Title 22 Regulations as it relates to the sleeping arrangements for the certified foster parent's biological child as well as the placed children in the home.

(26) Are appropriate and comprehensive monetary and clothing allowance logs maintained? (WELL-BEING)

<u>Finding(s)</u>: At the time of CAD's review of children's files, clothing receipts were missing for several children, an initial clothing inventory was dated two weeks after placement, a last recorded weekly allowance for one child was November 23, 2014, and there were no comprehensive records of purchased clothes (itemized logs).

PLAN: On March 18, 2015, Dangerfield Foster Family Agency provided in-service training to certified foster parents addressing record keeping, documentation, and maintenance of agency forms including guidelines for weekly allowance for children five-years and older, and keeping records that includes date of allowance, amount, child and certified foster parent's signature. Certified foster parents were introduced to a new *Clothing Purchase Form*. They were informed starting April 1, 2015, they must itemize and list all clothing that is purchased every month for each placed child. Concise instructions were provided as to attaching all receipts to the *Clothing Purchase Form* each month. A sample as to how the *Clothing Purchase Form* should be properly completed was provided to all certified foster parents. Each month, Agency Social Workers will collect the Clothing Purchase Form(s) with receipts that itemize purchase of each item of clothing. This form along with the receipts will be placed in the children's charts. During this in-services training, clothing standards and allocated monthly clothing allowance amounts were reviewed in great detail. Agency Social Workers were advised to complete initial clothing inventories upon a child's placement with Dangerfield Foster Family Agency.

IV. Maintenance of Required Documentation and Service Delivery

(27) Did the FFA obtain or document efforts to obtain the County Worker's authorization to implement the NSP? (WELL-BEING)

implementation. Program Administration will provide internal, ongoing Needs and Services Plans training to Agency Social Workers during team meetings. On April 21, 2015, Agency Social Workers will be provided guidelines as to new procedures during in-service training. Foster Family Agency Administrator and the Quality Assurance Reviewer will conduct monthly audits of children's charts to guarantee that initial Needs and Services Plans are being developed according to appropriate timelines effective April 1, 2015.

(35) Does the FFA Social Worker complete timely, comprehensive, quarterly reports? (to County workers by 10th business days following the end of each quarter from the date the child was placed). (WELL-BEING)

Finding(s): One child's 1st quarterly was 7 days late; 2nd quarterly 17 days late; 3rd quarterly 16 days late.

PLAN: To ensure Quarterly Reports are timely, Dangerfield Foster Family Agency Administration will follow similar procedural guidelines as in developing initial Needs and Services Plans. The following quality assurance process will be taken: 1) Agency Social Workers will submit Quarterly Reports to Program Administrator ten (10) days in advance of the due date with reports being returned to Agency Social Workers after review the following day and; 2) Dangerfield Foster Family Program Administration will provide ongoing Quarterly Report trainings to Agency Social Workers focusing on specific deficiencies noted during the monitoring review. Agency Social Workers will receive internal training pertaining to these new procedures on April 21, 2015. In addition, the Quality Assurance Reviewer will conduct monthly, internal audits of children's charts verifying Quarterly Reports are being developed and submitted on time. If Quarterly Reports continue to be submitted after the due date, Agency Social Workers responsible for the aforementioned deficiencies will receive individual advisory.

(36) Do FFA Social Workers conduct required visits with placed children in accordance with the contract? (SAFETY)

<u>Finding(s):</u> Weekly contacts were documented; however, upon notes review, CAD found identical notes (copied and pasted) for six home visit dates.

PLAN: Dangerfield Foster Family Agency Social Workers conduct weekly home visit with two of these contacts being unannounced. Agency Social Workers are required to comply with child/family contacts per Dangerfield Foster Family Agency Program Statement and County contract. Weekly child/family contacts are documented on the agency's FFA Visit Log template and completed by the case-carrying Agency Social Worker assigned to the child and certified foster home. The logs are maintained in the children's charts. The child in question was visited by the Agency Social Worker, however the FFA Visit Log was not accurately updated for six

(44) Are initial dental examinations conducted timely? (WELL-BEING)

<u>Finding(s)</u>: Initial medical appointments were three months late for two children. Initial dental examinations were two days late for one child; three months late for another child; and two months late for another child.

PLAN: Certified foster parents will receive re-training on initial medical and initial dental examinations (dental exams for children three-years-old and up) and proper protocol and procedure on April 15, 2015. Agency Social Workers will track thirty day deadlines (earlier according to age) for a newly placed child or children on their caseloads. They will require the certified foster parent to schedule initial medical and dental appointments and provide dates and times of future appointments. The Agency Social Worker will provide reminders and follow-up with certified foster parents regarding the outcome of the initial medical and initial dental examinations. They will obtain the Medical Examination Form and the Dental Examination Form as evidence of initial medical and dental care and treatment. These forms will be filed accordingly in the children's charts. Monthly auditing of children's charts will assist in identifying any deficiencies in this area. Further, Program Administrator will obtain information from Agency Social Workers during team meetings as to the placed children who have not received their initial medical and dental examinations and those children who have been provided care. In the event there are technical problems with a child's Medi-Cal, certified foster parents will make sure they obtain receipt of ineligibility from the doctor and/or dentist's office staff which will be retained in the child's chart. Agency Social Workers will receive internal in-service training on April 21, 2015 as to this new procedure. Dangerfield Foster Family Agency procedures will be effective April 1, 2015.

IX. Personal Needs/Survival and Economic Well-Being

(62) Are children always provided with weekly monetary allowances? (If after November 1, 2012, minimum base allowance per contract) (SELF-SUFFICIENCY)

Finding(s): A child was confused as to whether or not he was provided a weekly allowance.

PLAN: On March 18, 2015, Dangerfield Foster Family Agency Administration provided inservice training to certified foster parents addressing record keeping, documentation, and maintenance of agency forms, including guidelines for weekly allowance for children five-years-old and older, and keeping records that include date allowance distributed, amount (according to age and County contract), child and certified foster parent's signature confirming allowance exchange. Agency Social Workers will provide ongoing education to certified foster parents as to the purpose of distributing an allowance to a child such as allowances are to help develop responsibility and an understanding of financial matters (developmentally age-appropriate). During weekly home visits, Agency Social Workers will speak to the placed child (privately)